

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765110

FILED
Mar 04, 2007
Secretary of State

Entity Name: COLLEGE HEIGHTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1618 CREIGHTON ROAD
PENSACOLA, FL 32504 US

New Principal Place of Business:

2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 US

Current Mailing Address:

1618 CREIGHTON ROAD
PENSACOLA, FL 32504 US

New Mailing Address:

2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 US

FEI Number: 59-2249983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICKELSON, PATRICIA
1618 CREIGHTON ROAD
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

POINTS, DONNA J
2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONNA J POINTS

03/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MICARI, JOSEPH
Address: 2811 LANGLEY AVE #122
City-St-Zip: PENSACOLA, FL 32504

Title: VPD () Delete
Name: KOLOSEY, MARION
Address: 14937 SE MAPLE VALLEY HWY
City-St-Zip: RENTON, WA 98058

Title: STD () Delete
Name: MARSHALL, BEVERLY
Address: 4829 BALMORAL DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUMINSKI, STEPHEN
Address: 4253 BROOKSIDE DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: VD (X) Change () Addition
Name: DUNSON, BRIAN
Address: 1709 ENCINA WAY
City-St-Zip: MILTON, FL 32583

Title: SD (X) Change () Addition
Name: POGUE, DELARIAN
Address: 3202 SAMANTHA DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: TS () Change (X) Addition
Name: YOUNGBLOOD, DIANNE L
Address: 6826 EAST GATE ROAD
City-St-Zip: MILTON, FL 32570

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANNE L YOUNGBLOOD

TS

03/04/2007

Electronic Signature of Signing Officer or Director

Date